5904-S.E AMH APP AMH2731.3

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ESSB 5904 - H COMM AMD By Committee on Appropriations

ADOPTED AS AMENDED 4/24/03

1 Strike everything after the enacting clause and insert the 2 following:

"NEW SECTION. Sec. 1. The legislature finds that prescription 3 4 drugs are an effective and important part of efforts to maintain and improve the health of Washington state residents. 5 However, their б increased cost and utilization is straining the resources of many 7 people, particularly low-income elderly people who lack insurance 8 Furthermore, for such drugs. inappropriate 9 prescription drugs can result in unnecessary expenditures and lead to It is therefore the intent of the 10 serious health consequences. legislature to establish an evidence-based preferred drug list, develop 11 12 programs to provide prescription drugs at an affordable price to those 13 in need, and increase public awareness regarding their safe and costeffective use. 14

NEW SECTION. Sec. 2. A new section is added to chapter 74.09 RCW to read as follows:

- (1) To the extent funds are appropriated specifically for this purpose, and subject to any conditions placed on appropriations made for this purpose, the department shall design the medicaid prescription drug assistance program. Neither the benefits of, nor eligibility for, the program is considered to be an entitlement.
- (2) The department is directed to obtain necessary federal waivers to implement this program. Consistent with federal waiver conditions, the department is authorized to charge enrollment fees, premiums, or point-of-service cost-sharing to enrollees of the program.
 - (3) Eligibility for this program is limited to persons:
- 27 (a) Who are eligible for medicare or age sixty-five and older;
 - (b) Whose family income does not exceed two hundred percent of the

federal poverty level as adjusted for family size and determined annually by the federal department of health and human services;

- 3 (c) Who do not otherwise have insurance that provides prescription 4 drug coverage; and
 - (d) Who are not otherwise eligible under Title XIX of the federal social security act.
 - (4) The department is authorized to use a cost-effective prescription drug benefit design. Consistent with federal waiver conditions, this benefit design can be different than the benefit design offered under the medical assistance program. The benefit design may include a deductible benefit that provides coverage when enrollees incur higher prescription drug costs as defined by the department. The department also may offer more than one benefit design.
 - (5) The department is authorized to limit enrollment of persons who qualify for the program so as to prevent an overexpenditure of appropriations for this program or to assure necessary compliance with federal waiver budget neutrality requirements. The department shall not reduce existing medical assistance program eligibility or benefits to assure compliance with federal waiver budget neutrality requirements.
- 22 (6) No funds from an approved federal waiver that allows for the 23 collection of premiums from medicaid clients will be used to finance 24 the medicaid prescription drug assistance program.
 - (7) This program will be terminated within twelve months after implementation of a prescription drug benefit under Title XVIII of the federal social security act.
 - (8) The department shall provide recommendations to the appropriate committees of the senate and house of representatives by November 15, 2003, on financing options available to support the medicaid prescription drug assistance program. In recommending financing options, the department shall explore every opportunity to maximize federal funding to support the program.
- NEW SECTION. Sec. 3. A new section is added to chapter 41.05 RCW to read as follows:
 - (1) The health care authority shall establish a prescription drug

purchasing consortium and shall coordinate the participation of state 1 2 agencies, private entities, and private individuals in the consortium. State purchased health care programs shall purchase prescription drugs 3 through the consortium for those prescription drugs that are purchased 4 5 directly by the state and those that are purchased through reimbursement of retail pharmacies. The administrator shall not 6 7 require that any supplemental rebate offered by a pharmaceutical manufacturer for prescription drugs purchased for medical assistance 8 program clients under chapter 74.09 RCW be extended to state purchased 9 10 health care programs other than medical assistance, or to private individuals participating in the consortium. The authority shall 11 12 establish a preferred drug list for use as provided in this chapter 13 through an evidence-based process that evaluates the efficacy of 14 prescription drugs, considering safety, efficacy, likelihood compliance, outcomes, and any unique impacts on specific populations 15 16 based upon factors such as sex, age, ethnicity, race, or disability. 17 The preferred drug list shall be the basis for consortium purchasing by and on behalf of state purchased health care programs and private 18 individuals participating in the consortium. 19 In administering prescription drug benefits under state purchased health care programs, 20 21 agencies shall honor an endorsing prescriber's direction to dispense a 22 prescription drug as written on the prescription order, including refills of prescriptions for an antipsychotic or antidepressant drug, 23 24 in which case the pharmacist shall dispense the nonpreferred drug as 25 written.

(2) The administrator shall explore joint purchasing opportunities with other states to achieve quality cost-effective prescription drug coverage for those participating in the consortium.

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(3) Participation in the purchasing consortium and other related activities is purely voluntary for private entities and private individuals who lack insurance or are underinsured for prescription drug coverage. Unaffiliated individuals who participate in the consortium shall receive reduced costs comparable to those negotiated by the consortium for its preferred prescription drugs. The administrator may set reasonable fees, including enrollment fees for participating individuals, to cover administrative costs attributable

- to participation in prescription drug consortium activities. A private individual may limit their participation to one or more of the consortium's program components.
- 4 (4) The price discounts available pursuant to this section shall not be at the expense of retail pharmacies.
- 6 <u>NEW SECTION.</u> **Sec. 4.** A new section is added to chapter 41.05 RCW 7 to read as follows:
- The consolidated prescription drug purchasing account is created in 8 the custody of the state treasurer. All receipts under section 3(3) of 9 this act from the fees from the price discount program created in 10 11 section 3 of this act must be deposited into the account. Expenditures from the account may be used only for the purposes of section 3 of this 12 Only the administrator or the administrator's designee may 13 authorize expenditures from the account. The account is subject to 14 15 allotment procedures under chapter 43.88 RCW, but an appropriation is 16 not required for expenditures.
- NEW SECTION. Sec. 5. A new section is added to chapter 41.05 RCW to read as follows:

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- (1) The administrator shall establish and advertise a pharmacy connection program through which health care providers and members of the public can obtain information about manufacturer-sponsored prescription drug assistance programs. The administrator shall ensure that the program has staff available who can assist persons in procuring free or discounted medications from manufacturer-sponsored prescription drug assistance programs by:
- (a) Determining whether an assistance program is offered for the needed drug or drugs;
- (b) Evaluating the likelihood of a person obtaining drugs from an assistance program under the guidelines formulated;
- 30 (c) Assisting persons with the application and enrollment in an assistance program;
- 32 (d) Coordinating and assisting physicians and others authorized to 33 prescribe medications with communications, including applications, made 34 on behalf of a person to a participating manufacturer to obtain 35 approval of the person in an assistance program; and

(e) Working with participating manufacturers to simplify the system whereby eligible persons access drug assistance programs, including development of a single application form and uniform enrollment process.

- (2) Notice regarding the pharmacy connection program shall initially target senior citizens, but the program shall be available to anyone, and shall include a toll-free telephone number, available during regular business hours, that may be used to obtain information.
- (3) The administrator may apply for and accept grants or gifts and may enter into interagency agreements or contracts with other state agencies or private organizations to assist with the implementation of this program including, but not limited to, contracts, gifts, or grants from pharmaceutical manufacturers to assist with the direct costs of the program.
- (4) The administrator shall notify pharmaceutical companies doing business in Washington of the pharmacy connection program. Any pharmaceutical company that does business in this state and that offers a pharmaceutical assistance program shall notify the administrator of the existence of the program, the drugs covered by the program, and all information necessary to apply for assistance under the program.
- (5) For purposes of this section, "manufacturer-sponsored prescription drug assistance program" means a program offered by a pharmaceutical company through which the company provides a drug or drugs to eligible persons at no charge or at a reduced cost. The term does not include the provision of a drug as part of a clinical trial.

NEW SECTION. Sec. 6. A new section is added to chapter 74.09 RCW to read as follows:

Each of the state's area agencies on aging shall implement a program intended to inform and train persons sixty-five years of age and older in the safe and appropriate use of prescription and nonprescription medications. To further this purpose, the department shall award a development grant of up to twenty-five thousand dollars to each of the agencies upon a showing that:

(1) The agency has the ability to effectively administer such a program, including an understanding of the relevant issues and appropriate outreach and follow-up;

- 1 (2) The agency can bring resources to the program in addition to 2 those funded by the grant; and
- 3 (3) The program will be a collaborative effort between the agency 4 and other health care programs and providers in the location to be 5 served, including doctors, pharmacists, and long-term care providers.
- 6 <u>NEW SECTION.</u> **Sec. 7.** A new section is added to chapter 41.05 RCW 7 to read as follows:
- 8 The authority may adopt rules to implement this act.
- 9 <u>NEW SECTION.</u> **Sec. 8.** By January 1, 2005, the administrator of the 10 health care authority and the secretary of the department of social and 11 health services shall submit to the governor and the legislature a 12 progress report regarding the implementation of the programs created in 13 this act."

EFFECT: Directs the department of social and health services to seek a federal pharmacy plus waiver and report to the Legislature on financing options. Establishes a consortium to purchase prescription drugs at negotiated rates and allows individuals and private organizations to participate.

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